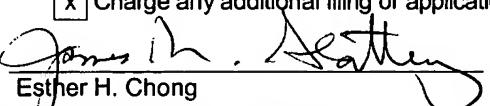




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<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. 0465-1109P																																											
Application No. 10/731,093-Conf. #4509	Filing Date December 10, 2003	Examiner P. H. Gupta		Art Unit 2627																																											
Applicant(s): Yong Cheol PARK et al.																																															
Invention: METHOD AND APPARATUS FOR MANAGING OVERWRITE ON AN OPTICAL DISC WRITE ONCE																																															
<b>MS Amendment</b> <b>Commissioner for Patents</b> <b>P.O. Box 1450</b> <b>Alexandria, VA 22313-1450</b>																																															
Transmitted herewith is an amendment in the above-identified application.																																															
The fee has been calculated and is transmitted as shown below.																																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="6" style="text-align: center; padding: 2px;">CLAIMS AS AMENDED</th> </tr> <tr> <th style="width: 15%;"></th> <th style="width: 15%;">Claims Remaining After Amendment</th> <th style="width: 15%;">Highest Number Previously Paid</th> <th style="width: 15%;">Number Extra Claims Present</th> <th style="width: 15%;">Rate</th> <th style="width: 15%;"></th> </tr> </thead> <tbody> <tr> <td><b>Total Claims</b></td> <td>14</td> <td>- 20 =</td> <td>0</td> <td>x 50.00</td> <td>0.00</td> </tr> <tr> <td><b>Independent Claims</b></td> <td>6</td> <td>- 6 =</td> <td>0</td> <td>x 200.00</td> <td>0.00</td> </tr> <tr> <td colspan="6" style="border-top: 1px solid black; border-bottom: 1px solid black; padding: 2px;">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> </tr> <tr> <td colspan="6" style="border-bottom: 1px solid black; padding: 2px;">Other fee (please specify):</td> </tr> <tr> <td colspan="6" style="border-bottom: 1px solid black; padding: 2px;"><b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> 0.00</td> </tr> </tbody> </table>						CLAIMS AS AMENDED							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		<b>Total Claims</b>	14	- 20 =	0	x 50.00	0.00	<b>Independent Claims</b>	6	- 6 =	0	x 200.00	0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> 0.00					
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<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> 0.00																																															
<input checked="" type="checkbox"/> Large Entity			<input type="checkbox"/> Small Entity																																												
<input type="checkbox"/> No additional fee is required for this amendment.																																															
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.																																															
<input type="checkbox"/> A check in the amount of \$ _____ is enclosed.																																															
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																															
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.																																															
<input checked="" type="checkbox"/> Credit any overpayment.																																															
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																															
 Esther H. Chong Attorney Reg. No.: 40,953				Dated: December 26, 2006																																											
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000																																															